



Serial No. 09/839,671

OKI.459

Amendment dated January 6, 2005

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re PATENT APPLICATION of

Katsuaki Matsui

Group Art Unit: 2857

Serial No.: 09/839,671

Examiner: J. West

Filed: April 23, 2001

Confirm. No.: 1009

For: SEMICONDUCTOR DEVICE HAVING A MODE OF FUNCTIONAL TEST

AMENDMENT

U.S. Patent and Trademark Office
2011 South Clark Place
Customer Window, **Mail Stop RCE**
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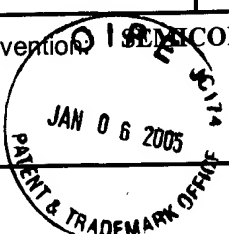

Date: January 6, 2005

Sir:

In response to the Final Office Action dated October 18, 2004, the following amendments and remarks, along with a Request for Continued Examination (RCE), are respectfully submitted in connection with the above-identified application.

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 5 of this paper.

AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No. OKI.459	
Applicant(s): Katsuaki Matsui					
Application No. 09/839,671	Filing Date April 23, 2001	Examiner J. West	Customer No.	Group Art Unit 2857	Confirmation No. 1009
Invention: SEMICONDUCTOR DEVICE HAVING A MODE OF FUNCTION TEST					
 COMMISSIONER FOR PATENTS:					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	4 -	22 =	0	x \$50.00	\$0.00
INDEP. CLAIMS	1 -	4 =	0	x \$200.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 50-0238 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038.					
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.					
 Signature			Dated: January 6, 2005		
ANDREW J. TELESZ, JR. REG. NO. 33,581 VOLENTINE FRANCOS & WHITT, P.L.L.C. ONE FREEDOM SQUARE 11951 FREEDOM DRIVE, SUITE 1260 RESTON, VA 20190 TEL. NO. (703) 715-0870			I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____ <div style="text-align: center;">(Date)</div> <div style="text-align: center;">_____ Signature of Person Mailing Correspondence</div> <div style="text-align: center;">_____ Typed or Printed Name of Person Mailing Correspondence</div>		
CC:					